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Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P93000049890 (5)**

1. Corporation Name
FLORIDA LEISURE MANAGEMENT, INC.

Principal Place of Business	Mailing Address
3501 WEST VINE ST SUTIE 312 LA MIRADA PLAZA KISSIMMEE FL 34741 US	3501 WEST VINE ST SUITE 312 LA MIRADA PLAZA KISSIMMEE FL 34741-4643 US

3. Date Incorporated or Qualified: 07/08/1993
3a. Date of Last Report: 05/01/1996

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. #, etc. — 22 / 27
City & State — 23 / 28
Zip — 24 / 29
Country — 25 / 30

4. FEI Number: 59-3192172 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

FLORIDA LEISURE, INC.
STE 312, LA MIRADA PLAZA
3501 W. VINE ST
KISSIMMEE FL 34741

was → is

10. Name and Address of New Registered Agent

81 Name: Florida Leisure Inc 326
82 Street Address (P.O. Box Number is Not Acceptable): 3501 W Vine St
83
84 City: Kissimmee, Fl FL 85 Zip Code: 34741

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BALL, GORDON C STE 312 LA MIRADA PLAZA, 3501 W. VINE ST. KISSIMMEE FL 34746	☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	☒ Change ☐ Addition ste 326 3501 W Vine St Kissimmee, FL 34741
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BALL, JOAN M STE 312 LA MIRADA PLAZA, 3501 W. VINE ST. KISSIMMEE FL 34746	☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	☒ Change ☐ Addition ste 326 3501 W Vine St Kissimmee, FL 34741
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GUNN, HARRY STE 312 LA MIRADA PLAZA, 3501 W. VINE ST. KISSIMMEE FL 34746	☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	☒ Change ☐ Addition ste 326 3501 W Vine St. Kissimmee, FL 34741
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GUNN, PERRY J STE 312 LA MIRADA PLAZA, 3501 W. VINE ST. KISSIMMEE FL 34746	☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	☒ Change ☐ Addition ste 326 3501 W Vine St. Kissimmee, FL 34741
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (9/96)

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: _____ 1/14/97 (407) 870-1600
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #